

**2020 HAMPSTEAD FARMERS' MARKET**  
**RELEASE AND INDEMNIFICATION FORM**

1. In consideration of the permission given to me by the Hampstead Farmers' Market Managers to participate in the 2020 Hampstead Farmers' Market, I DO HEREBY EXPRESSLY WAIVE AND RELEASE all demands, damages, actions, causes of actions, suits and claims of any nature whatsoever, whether in law or equity, that I or my heirs, next of kin, executors, administrators, estate agents and assigns, and any other representatives which might otherwise have against the Town of Hampstead, Maryland, the Mayor and Town Council of Hampstead, the Hampstead Volunteer Fire Department, their officials, agents, employees (or any other location to which the Farmers' Market may have to temporarily re-locate), and the Market Advisory Team and its members thereof and therefore on account of any death or injuries, both to my person and/or to my property, whether foreseeable or not, which may occur, directly or indirectly, or develop at any time in the future as a result of my activities, association or participation in the 2020 Hampstead Farmers' Market.
2. I ALSO EXPRESSLY AGREE on behalf of myself and my heirs, next of kin, executors, administrators, estate agents and assigns, and any other representatives to indemnify and hold harmless the Town of Hampstead, Maryland, the Mayor and Town Council of Hampstead, the Hampstead Volunteer Fire Department, their officials, agents, employees, and the Market Advisory Team and its members thereof and therefore on account of any and all right, claim or cause of actions existing or which possibly could arise at any time in the future as a direct or indirect result of my activities, association or participation in the 2020 Hampstead Farmers' Market.
3. I hereby declare that the terms of this RELEASE AND INDEMNIFICATION FORM have been fully read and understood by me, and freely and voluntarily entered into and accepted by me, and I hereby acknowledge receipt of a copy of this RELEASE AND INDEMNIFICATION FORM.
4. I acknowledge that I have had the opportunity to obtain independent legal advice with respect to the execution of this Release and Waiver Form.

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Print Name:\_\_\_\_\_

Signature:\_\_\_\_\_

Date:\_\_\_\_\_

Witness:\_\_\_\_\_

**RETURN to:**

**HAMPSTEAD FARMERS' MARKET**  
**P. O. BOX 702**  
**HAMPSTEAD, MD 21074**